

SUPREME COURT CLERK'S OFFICE 417 SOUTH KING STREET HONOLULU, HAWAI'I 96813-2912

FINANCIAL DISCLOSURE STATEMENT THIS SPACE FOR OFFICE USE ONLY

> **Electronically Filed Supreme Court** SCFD-15-0000335 14-APR-2015 08:33 AM

Before completing this form please read the instructions for Financial Disclosure Statement, including the text of Supreme Court Rule 15. REMINDER: For all items requiring a monetary amount, the following financial range codes may be used.

- A Less than \$1,000
- B At least \$1,000 but less than \$10,000 C At least \$10,000 but less than \$25,000
- E At least \$50,000 but less than \$100,000 F At least \$100,000 but less than \$150,000
- D At least \$25,000 but less than \$50,000
- G At least \$150,000 but less than \$250,000
- H At least \$250,000 but less than \$500,000 I At least \$500,000 but less than \$750,000 J At least \$750,000 but less than \$1,000,000
- K -\$1,000,000 or more

TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.

(Type or Print Clearly)						
NAME: McM	llen AST)	Georgia (FIRST)	K.	N E)	POUSE OR DOMESTIC PARTNER:	
OFFICE ADDRESS: Law Office of Georgia K. McMillen; P.O. Box NUMBER, STREET CITY OR TOWN: Walluku Maui, HI ZIP CODE: 96				No. of Depen	No. of Dependent Children: (Do not include names)	
JUDICIAL POSITI Per Diem, Di	on HELD st. & Dist. Family	DATE OF APPOINTMENT 06/02/2014	808	OFFICE PHONE 242 4343		
CALENDAR YEAR	COVERED BY THIS DISCLOSE	IRE: 20 <u>14</u>				
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATIO	N			ANNUAL INCOME B	
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rend				, 	
EMPLOYER/LAW FIRM Law Office of Georgia K. McMillen		BUSINESS ADDRESS P.O. Box 1512; Wailuku Maui, HI 96793		ANNUAL INCOME		
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR (if income for services rend	DOMESTIC PARTNER AI ered exceeds \$1,000)	ND DEPENDENT CHILDREN			
		EMPLOYER			ANNUAL INCOME	
State of Hawai`i, Department of Education			E			
Keawala`i Co	ngregational Church	•			В	
					<u> </u>	

ITEM 4 RSCH 15(d)(1)	ANY OTHER INCOME, FOR SERVICES RENDERED, IN EXCESS OF \$1,000 - INCOME DISCLOSED IN ITEMS 1 - 3 NEED NOT BE REPEATED HERE				
	SOURCE	NATURE	OF SERVICES REN	DERED	AMOUNT
	:				<u> </u>
\times	Check here if entry is None	Check here if you ha	ave attached addition	al sheets	,
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL III VALUE OF \$5,000 OR MORE OR EQUA	NTEREST, HELD IN ANY AL TO 10% OF THE OW!	BUSINESS CARRYINERSHIP OF THE BU	ING ON BUSINESS IN TH JSINESS.	HE STATE, HAVING A
	NAME OF BUSINESS	NATURE O	BUSINESS	NATURE OF INTERE	EST ENTER AMOUNT OR NO. OF SHARES
Law Office of	f Georgia K. McMillen	Legal Services		sole practitioner	not applicable
	Check here if entry is None	Check here if you ha	ave attached addition	al sheets	
ITEM 6 RSCH 15(d)(2)					
	NAME OF BUSINESS	DATE OF	TRANSFER	VALUE	OF TRANSFER
					4
(min + -					
	Check here if entry is None	Check here if you h	ave attached addition	al sheets	
ITEM 7 RSCH 15(d)(3)	LIST EACH OFFICERSHIP, DIRECTOR	SHIP, TRUSTEESHIP O	R OTHER FIDUCIAR	Y RELATIONSHIP HELD	IN ANY BUSINESS.
	NAME OF BUSINESS		TITLE AN	D TERM OF OFFICE	COMPENSATION (enter amount or NONE)
☑ Check here if entry is None ☐ Check here if you have attached additional sheets					

ITEM 8 RSCH 15(d)(4)	LIST CREDITORS, O PERIOD. LIST CRED	OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE EDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.			
	NAME AND ADDRES	SS OF CREDITOR	ORIGINAL AMOUNT OWED	AMO	UNT OWED AT END OF YEAR
Bank of Ame	rica; P.O. Box 517	0; Simi Valley CA 9306	2 F		Е
		one Check	here if you have attached additional sheets		
ITEM 9	T		ELD AN INTEREST WITH A FAIR MARKET		n nnn OP MOPE
RSCH 15(d)(5)	KZZE / KOI EKIT IK	POSTAL ZIP CODE OF LOC		VALUE OF \$1	VALUE
96793					н
	Check here if entry is N	one	here if you have attached additional sheets	· ·	
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE OF	WHICH EXCEEDS \$10,000, ACQUIRED I	DURING THE (DISCLOSURE PERIOD.
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST	NAME AND ADDRESS OF PERSON REC CONSIDERATION	EIVING	CONSIDERATION GIVEN
☐ Check here if entry is None ☐ Check here if you have attached additional sheets					
ITEM 11 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE OF	WHICH EXCEEDS \$10,000, TRANSFERE	RED DURING 1	THE DISCLOSURE PERIOD.
POSTAL ZIP C	ODE OF LOCATION	NAME AND ADDRESS OF I	PERSON FURNISHING CONSIDERATION		CONSIDERATION RECEIVED
	heck here if entry is No	ne \sqcup Check	here if you have attached additional sheet	5	

ITEM 12 CREDITOR INTEREST IN INS	CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE.				
NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE		
			, i		
☑ Check here if entry is None	Check here if you have attach	ed additional sheets			
ITEM 13 RSCH 15(d)(7); Rule 3.13 Revised Code of Judicial Conduct GIFT(S) THAT MUST BE REPORTED UNDER RULE 3.13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.					
SOURCE	DESCRIPTI	DESCRIPTION OF GIFT			
Check here if entry is None	Check here if you have attach	ned additional sheets			
ITEM 14 RSCH 15(d)(8) & 22(h) FULL-TIME JUDGES' APPRO	CH 15(d)(8) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION				
I attendedhours of Approved Judicial Education during the reporting period.					
REMARKS:					
☐ See attached sheets.					
CERTIFICATION: I hereby certify that the abov	e is a true, correct, and complete statement.	•			
SIGNATURE: Par lu luh 4/13/2015					
NOTE: This filing is not valid without a signatu	re.				